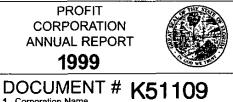
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90064 026 ***150.00

A C PRO	OPERTY INVESTMENT COMP	ANY N.V., INC.							
Principal Plac	e of Business	Mailing Address				F HORIDANI HON DINKS INGOLUM) 	(Oll DIBIL (DD)
Principal Place of Business Mailing Address A. J. STANTON, JR. SS ORANGE AVE 1466 ORLANDO FL 32801 Mailing Address A. J. STANTON, JR. SS ORANGE AVE 1466 ORLANDO FL 32801				١		DO NOT \ 3. Date Incorporated or Qual	WRITE IN THIS	SPACE	
		•		, •		12/13/1988	iou		
2. Principal Place of Business 2a. Mailing Address				•		4. FEI Number		I Ap	plied For
21 37 N. Orange Ave. 26 37 N. Orange			e Ave-			59-2259676		<u> </u>	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75 A	Additional
22 Suite 210 27 Suite 210						5. Certifcate of Status Desire	<u> </u>	Fee Re	quired
City & State City & State						8. Election Campaign Financ	ing î	\$5.00	
23 Orlando, Pl 28 Orlando, F			<u>/</u>			Trust Fund Contribution		Added to	o Fees
Zip	Country S A	Zip	Country		1	8. This corporation owes the	current year Inf		□No
24 3280	<u> </u>	29 32801 30	1 05	/4		Personal Property Tax. Name and Address of No.	w Posistered		
	9. Name and Address of Current	Registered Agent	81	Name		o. Name and Address of No	W Negistered	Agont	
STANTON, A. J., JR255 S-ORANGE AVE-1466 37 N. Orange Ave-						· · · · · · · · · · · · · · · · · · ·			
				Street A	ddress	(P.O. Box Number is Not Acc	eptable)		
ORLANDO FL 32801 Suite 210									
			84						
				City			FL	85 Zip C	Code
agent. I a SIGNATURE	to the provisions of Sections	ons of, Section 607.0505, Florida	Statutes	i. nt signature re			DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	DPS	☐ DELETE	1.1 TITLE					☐ Change	☐ Addition }
NAME	STANTON, A. J., JR.	N. Orange Ave	1.2 NAME						.
STREET ADDRESS	2011 A 211		1.3 STREE	TADDRESS		•			
C/TY-ST-Z/P			1.4 CITY-S	T-ZIP				☐ Change	Addition
TITLE	DELETE 2.1 π							☐ Change	
NAME			2.2 NAME						
STREET ADDRESS	~]			TADDRESS					1
CITY-ST-ZIP	2.4 DELETE 3.1			ST-ZIP	_			Change	Addition
NAME			3.2 NAME						_
STREET ADDRESS			l	T ADDRESS	_	-	• .	-	
CITY-ST-ZIP			3.4. CITY-5	i					
TITLE	☐ DELETE 4.1 TI							☐ Change	☐ Addition
NAME			4.2 NAME						}
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	5.1 TITLE	- 1	-			Change	☐ Addition
NAME			5.2 NAME			,			
STREET ADDRESS			5.3 STREE	TADORESS					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		· 			
TITLE		☐ DELETE	6.1 TITLE					☐ Change	Addition
NAME ·			6.2 NAME	T. A. D. D. C. C. C.					
STREE! ADDRESS				TADDRESS					ł
CITY-ST-ZIP			6.4 CITY-S	II-ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: